

Weekly Check-in Sheet Descriptions

TA=Types of Abuse (From List)

List any/all *types* of abuse (*not frequency or total acts*) from the list below by the corresponding number, according to any you committed in the previous week. For example, if you yelled at someone and/or called them a name, you would write “2” in the column, representing “verbal abuse.” If you also insisted on sex from your partner even though you knew they were not “in the mood,” you would also write “6” in the same column, representing “sexual abuse.” Continue listing all types of abuse in the same manner, until all from the previous week are listed. If you did not commit any acts of abuse, simply put a “0,” representing “No types of abuse” committed in the previous week. A standard goal of Perpetrator Treatment is 10 consecutive weeks of “0”, followed by ongoing relapse prevention.

- 1) Physical
- 2) Verbal
- 3) Psychological
- 4) Economic
- 5) Property
- 6) Sexual
- 7) Collateral

CB=# of Controlling Behaviors

Feel free to use the provided “Controlling Behaviors” list as inspiration for this category where you write the actual, total number of behaviors that you identify as controlling from the previous week. For example, if you were aware that—during a brief encounter with your child over their wanting to leave the home before finishing their homework—you interrupted, raised your voice, and then dominated the conversation, giving several orders, and not allowing your child to speak back . . . Well, let’s see . . . that’s 1 for interrupting; 1 for each time you raised your voice (typically, each time you spoke a sentence or gave an order; let’s guess in this case, about 10 times); plus 1 for dominating the conversation; plus 3 for giving orders; and another for disallowing a reply (oh, and another 4 for raised eyebrows, plus finger pointing on each of the 3 “direct orders”); that would come to a grand total of 19 . . . all in a matter of under 2 minutes! Do this for each and every incident and/or interaction with others over the course of the week where you may have used a controlling behavior or two . . . or a dozen. If you are sincerely honest and aware, you will soon find that a “0” in this column is virtually impossible!

J=# of Journals turning in

Simply record the number of Control Journals you are turning in AT THE TIME OF YOUR VERBAL CHECK-IN. The number in this column each week should represent the actual number of journals you turned in to your facilitator, not a running total of all journals turned in, nor the number of journals you completed but failed to turn in. If you are turning in an “Anger Journal” from the workbook (*up to 12 of the required 25 journals can be in this format*), simply find another group member to review, sign, and date each journal you completed, then record the total number for the week that you had reviewed and signed. When it is time for you to complete your verbal check-in, hand the workbook to your group facilitator to have them validate each journal for which you desire credit. You will only be awarded credit for journals that have been reviewed and approved.

A&D=Alcohol & Drug Use (Y/N)

Notice the word “use” and not “abuse.” This is a simple “y” or “n” according to whether or not you partook of either alcohol or illegal drugs. You do not need to record prescription drug use, so long as it was under the care of a qualified physician. So, taking your partner’s Vicadin™ for your back pain, even with their consent, would qualify as a “y” as it is “illegal drug use.” Also, a beer or two watching a football game on TV *and* getting drunk on hard liquor would both be a “y,” as both constitute “alcohol use.” It is expected that you learn to understand better, and report to the group, your use and/or abuse of alcohol and/or illegal drugs and any influence it has on your tendency to abuse & control. Often, individuals will need to address alcohol and/or drug issues *before* effective change can occur in abusive & controlling behavior.

VC=Victim Contact (Y/N)

Another “y” or “n”, depending on whether or not you had *any* (purposeful or incidental; in person, phone, text, email, etc.,) contact with the person(s) identified as the “victim” in the situation/relationship that led to your referral to this program. Similarly to alcohol/drug use, it is expected that you learn to understand better, and report to the group, how the dynamics between you and the victim influence(d) your tendency to abuse & control. Often, individuals will need to separate (by court-order or voluntarily; and in either one or more of the following ways: physically, emotionally, sexually, financially, etc.) from their primary victim *before* effective change can occur in abusive & controlling behavior. Furthermore, victims often *need* (whether they appear to *want* to, or not) a healthy and purposeful separation to occur in order for them to heal, gain proper perspective, grow, and/or make important decisions without your abusive and/or controlling influence.

SC=Self Care (1-10)

In this column, simply rate on a scale of 1-10 (1 being “lousy” and 10 being “outstanding”) how *satisfied* you are with ALL the areas of your life. Beyond sleeping, shaving, and brushing your teeth this category represents an average of 16 actual sub-categories that are covered in our “Self Care” presentation. For example, due to some extra hours this week at a decent job that you are particularly grateful for during a rough economy, you might be mostly satisfied with your job/work/career (one sub-category) and would rate it an 8 this week. This is followed by a 3, however, in romantic/marital (another sub-category) because of your feeling of loss and uncertainty during this “No Contact Order” period with your spouse. Follow this with a 6 in health maintenance because you’ve had to eat a bit more “fast food” than you’d like and were a bit short on sleep, along with another 6 in social/friends, because you did reunite with some old friends over the weekend for a birthday celebration. Finally, you give yourself a lowly 2 in hobbies/interests, because you realize you haven’t done much of anything in this category all week! Therefore, in our partial example of 5 sub-categories, you would average them in the following way:

- 8 Job/work/career
- 3 Romantic/marital
- 6 Health maintenance
- 6 Social/friends
- 2 Hobbies/interests

25 Total (Divided by 5 sub-categories) = **Self Care: 5**

EI=Emotional Intensity (1-10)

This is the only category for the week that you rate “on the spot”, rather than over the course of the previous week. Emotional intensity refers to the overall level of intensity for ALL FEELINGS you might be experiencing (positive or negative) as you ARRIVE AT GROUP. For example, you might have had a non-descript day at work; arrived home without incident; showered; got something to eat; left on time; and even arrived to group a few minutes early, finding yourself in leisurely chat with another group member before receiving your Check-In Sheet. As you reflect on the sum of all your current feelings, you realize that you are unusually calm and relaxed, without much intensity at all. Give yourself a 2.

On the other extreme, however, let’s say today didn’t go so well at work; traffic home was brutal; you got home and things were in an uproar; so you had to abruptly leave without showering, eating, or much of a ‘goodbye’ to your family, only to get a call from your spouse on the way complaining that you seem ‘distant’ lately. You arrive at group, just shy of the start time, run in and realize you forgot your folder in the car . . . safely secured inside along with your keys! Give yourself a 9.

It is expected that very early on in the program, you learn to identify and understand better your emotional intensity and its influence upon your tendency to use abusive & controlling behavior. In the above examples, it is probably obvious that one’s immediate level of emotional intensity and/or stress could easily influence their propensity to abuse & control, primarily out of “reaction.” While one could still easily be abusive & controlling while feeling very little emotional intensity (i.e. teasing a partner about a sensitive issue in front of others, thereby humiliating them, but truly believing, “*I am only kidding*” or “*They should be able to take a little joke*”), most obvious forms of abuse occur when emotional intensity is high.

LS=Life Stresses (From List)

Recorded similarly to the "Types of Abuse" in the first column, this column will contain any/all of the following items that have *changed* in the previous week, thereby causing stress. It should be understood that changes can be either positive or negative, desired or undesired, beneficial or detrimental. All significant change in the listed categories (#8 represents any significant change not covered in items 1-7) require some level of adjustment and reorientation, which places stress upon you. Stress, like emotional intensity, can—and likely does—have an influence on your tendency to use abusive and/or controlling behavior. If there were no significant changes in the previous week, simply mark "0." If any of the items on the list are still stressful to you, but remained relatively the same as last week, you would still mark "0" and report, "I have no *new* life stresses."

Changes in . . .

- 1) Living Arrangement
- 2) Job Status
- 3) Ability to Pay Bills
- 4) Primary Relationship (most recent)
- 5) Medical/Mental Health Status
- 6) Family Relationship Status
- 7) Legal
- 8) Other

SH=Spiritual Health (1-10)

Formerly a sub-category under "Self-Care," this program has chosen to highlight spirituality and give "Spiritual Health" its own column. On a scale of 1-10, rate your overall attention and follow-through this week to the various activities, attitudes, practices, or "disciplines" that you feel contribute to your spiritual growth or understanding. This may include going to church, reading the Bible or other spiritual books, praying, spending time alone in reflection, journaling, going for walks or hikes, meditating, participating in a small group or study, serving/volunteering, evangelizing, etc. Whatever you've determined contributes positively to your spiritual well-being, go ahead and rate how much of it/them you practiced this week. If you did everything you know to do, give yourself a 10. If only half, a 5. None? Still give yourself a 1. At least God was still aware of your existence!

Tools=Specific choices, behaviors, or activities replacing abuse or control

This may be a tough column to fill in everything you did, so maybe choose to highlight one or two of the specific choices, behaviors, or activities that you exercised *instead of* abuse & control. For example, if you consciously chose to listen to your child first, instead of interrupting and dominating the conversation, write "listening" as your tool. If you then went on to use assertiveness, negotiating, or other problem-solving or parenting skills (rather than orders, threats, yelling, violence), go ahead and write those down accordingly. Another example might be if you exercised patience & acceptance (instead of dismissive sounds, micro-managing, nagging, blowing up, etc.) by allowing your spouse to drive (eat, sleep, fold laundry, load the dishwasher, dress, talk, laugh, organize, brush their teeth, etc.) the way he/she chooses and/or grew up doing long before you ever came along, then put "patience & acceptance" and know that you are finally catching a lot of what this program is all about!

ORR=Overall Relapse Rating (1-10)

This final category is a rating of 1-10 of how likely you are to commit an act (or acts) of abuse in the upcoming week. A "1" is "extremely unlikely" while a "10" is "absolutely certain," due to premeditation. Give yourself a "5" if you feel at all uncertain about how you're doing with your Relapse Prevention Plan, or if you had a type of abuse this week and cannot convince yourself or other members of the group that you can prevent yourself from doing it again. Any rating of "4" or below will notify the group facilitator that a complete, verbal check-in may not be necessary from you this week. Any rating at "5" or above will require a complete verbal check-in with a verbal confirmation of a relapse plan. Anything "7" and above will require an Abuse Intervention Sheet to be completed and reviewed by the group and/or facilitator before leaving group.